

U.S. Department of Justice  
United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF David A. Stebbins	4:21-cv-04184-JSW
DEFENDANT Karl Polano, et al.	TYPE OF PROCESS ***See below***

**SERVE AT** { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
Discord Inc. Ruth Chang  
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
444 De Haro St. Suite 200 San Francisco, CA 94107

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  David A. Stebbins 123 W. Ridge Ave., APT D Harrison, AR 72601	Number of process to be served with this Form 285 5
	Number of parties to be served in this case 1
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

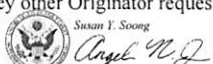
**RECEIVED**  
United States Marshal

Fold

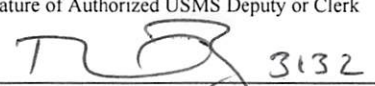
\*\*\*Summons, Complaint, Amended Complaint, Order and docket number 12\*\*\*

AUG 04 2021

Northern District of  
California - Oakland

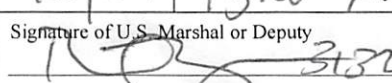
Signature of Attorney other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 510-637-3535	DATE 7/1/21
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## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 5	District of Origin No. 11	District to Serve No. 11	Signature of Authorized USMS Deputy or Clerk 	Date 8/4/2021
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) TAHRIQ MARSHALL SECURITY GUARD	<input checked="" type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 8/25/2021
	Time 13:08
	Signature of U.S. Marshal or Deputy 

Service Fee \$165	Total Mileage Charges including endeavors \$8.29	Forwarding Fee —	Total Charges \$73.21	Advance Deposits —	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS:  
8/25/2021 14-8mi @ .56¢

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED